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ISSUE BRIEF

Improving Health Plan Directories for Members Seeking Mental Health Services

Since the onset of COVID-19, the demand for mental health services has increased sharply across the US:¹



62% of psychologists reported receiving 37% more referrals than the previous year.



68% of practitioners reported waitlist increase since the onset of the pandemic.

While many mental health providers do not accept commercial insurance, some still appear in health plan's provider directories. For patients seeking behavioral health services, this means that after struggling to find a provider and/or waiting on a list for an appointment, they then may receive surprise medical bills.

The Impact on Members

In the United States, the average cost of psychotherapy ranges from \$100 to \$200 per session.² Additionally, these services are up to six times more likely than general medical services to be delivered by an out-of-network provider.³

Health plan provider directories are crucial for members to find in-network providers: 44% of privately insured patients use these directories to find mental health treatment, but 53% of them found inaccuracies in the directory.⁴ These patients were twice as likely to receive treatment from an out-of-network provider and four times more likely to receive a surprise bill for out-of-network treatment.

Despite ongoing efforts, maintaining accurate health plan directory data has been a long-standing challenge for both payers and providers. However, it is often members who end up paying the largest price.

A Better Experience

Directory Management, a CAQH solution developed in collaboration with CAQH member health plans, helps payers maintain and improve the accuracy of provider directories and meet requirements of the No Surprises Act.

Directory Management streamlines data collection by enabling practitioners to update their directory information once and share it with all participating health plans authorized to receive the data.

To simplify the process, directory-related questions are included in the CAQH Provider Data Portal user profiles. Users are also asked to confirm previously captured practice location data. This approach ensures data accuracy and quality.

To help plans and physician practices comply with the No Surprises Act, Directory Management was enhanced to remind providers to update, submit and confirm their practice information every 90-days.⁵ The practice location screens within the Provider Data Portal also now highlight the date the practice location record was last confirmed, making it easy for health plans to discern how up-to-date the information is, and take any necessary action.

If a provider's practice location record has not been reviewed or updated in the last 60 days, they will be prompted by an automated message to review and confirm their data.

Giving providers clear, actionable insight into their directory information minimizes the potential for members to unknowingly seek care from an out-of-network provider.

Driving change with technology

CAQH solutions automate workflows, deliver a wealth of accurate and actionable data, and create a better experience for both providers and health plans.



To learn more about how Directory Management helps improve the experience for members seeking mental health services contact Email sales@caqh.org or visit caqh.org/directory.

¹ Demand for mental health treatment continues to increase, say psychologists. American Psychological Association, Oct. 19, 2021

² How Much Does Therapy Cost in 2023?. Forbes Health, May 4, 2023.

³ Incorrect Provider Directories Associated With Out-of-Network Mental Health Care and Outpatient Surprise Bills. Health Affairs, June 1, 2020, Vol. 39, No. 6.

⁴ Ibid.

⁵ 2021 (CAA) (Pub. L. 116-260), Division BB, <https://www.federalregister.gov/d/2022-21904>